24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Our Principles PAC	
	C C00603621
Check if X 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
Campaign Solutions	M M / D D / Y Y Y Y
Mailing Address 117 N. St. Asaph Street	03 21 2016 Amount
	Alloun
City State Zip Code	4750.00
Alexandria VA 22314	Transaction ID : SE.5232 Date of Disbursement or Obligation
Purpose of Expenditure Voter contact-emails Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Donald J. Trump Oppose	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
DDC Advocacy	M = M / D = D / Y = Y = Y
Mailing Address 805 15th Street, N.W.	03 20 2016
Suite 300	Amount
City State Zip Code	648.54
Washington DC 20005	Transaction ID : SE.5225 Date of Disbursement or Obligation
Purpose of Expenditure Votor contest telephane cells Category/	M M / D D / Y Y Y Y
Voter contact-telephone calls Type	
Name of Federal Candidate Support Office	e Sought: House District:
Donald J. Trump Oppose	President Senate State: UT
Calcillati Total To Bato	ursement For: X Primary General
Per Election for Office Sought 0.00 2016	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	5398.54
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 7 1 1 7 1 1 7 1
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
2 410	03 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	